PATENT APPLICATION FEE DETERMINATION RECORD Effective January 1, 2003

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEO			OTHER THAN		
TOTAL CLAIMS			n				1	RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			12 minus 20=		• \$			X\$ 9=		ÖR	X\$18=		
INDEPENDENT CLAIMS			2 mi	nus 3 =	d			X42=		OR	X84=		
MULTIPLE DEPENDENT CLAIM PR								+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						,	TOTAL		OR	TOTAL	750		
\mathcal{U}_{H}	11/04 c	LAIMS AS A (Çolumn 1)	MENDED) - PART II (Column 2) (Column 3)			<u>)</u>	SMALL E	ENTITY	OR	OTHER SMALL I		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 13	Minus	* 20		=		X\$ 9=		OR	X\$18=	· · · · · · · · · · · · · · · · · · ·	
	Independent	TATION OF MI	Minus	*** Z	3		┇	X42=		OR	X84=		
L	FINST PRESE	NIATION OF MI	JUITPLE DEF	PROCINI	COAIIVI		j	+140=		OR	+280=		
					•	•	ı	TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)		(Colu	nn 2)	(Column 3)				•			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	•	OR	X\$18=		
	Independent	* NTATION OF MI	Minus	***	CLAIM]=	4	X42=		OR	X84=		
ــــــــــــــــــــــــــــــــــــــ	THESE	INTANON OF MA	JETH LE DEF	LINDEIN	CDAIIV		ا ل	+140=		OR	+280=		
						•		TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
		(Column 1)	•	(Colu		(Column 3))						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	▋▋	X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	F (2) 1 11 1	-		X42=		OR	X84=		
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE									OB.	TOTAL			
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													